

HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

FORM ORG

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(To be filed by organizations, employing organizations and individuals
other than registered lobbyists)

HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
STATE ETHICS COMMISSION

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|---|-----------------|----------------------------------|-------|--------------|
| For lobbying reporting period: | Contact Person | Michael V. Yamane | Phone | 808-246-8208 |
| <input type="checkbox"/> January 1 – last day of February | Organization | Kauai Island Utility Cooperative | | |
| <input checked="" type="checkbox"/> March 1 – April 30 | Mailing Address | 4463 Pahee Street | | |
| <input type="checkbox"/> May 1 – December 31 | | Lihue, HI 96766 | | |
| Year of Report <u>2005</u> | | | | |

PART 1. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement

Period was: \$ _____

EXPENDITURES

| Category | Total Amount | Category | Total Amount |
|--|--------------|-------------------------|--------------|
| 1. Preparation & distribution of lobbying materials | | 7. Entertainment | |
| 2. Media Advertising | | 8. Food & beverages | |
| 3. Telegraph, telephone and other forms of telecommunication | | 9. Gifts | |
| 4. Postage | | 10. Loans | |
| 5. Compensation paid to lobbyist | \$3,470.62 | 11. Other disbursements | |
| 6. Fees (other than to lobbyists) | | TOTAL EXPENDITURES | \$3,470.62 |

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

| Name | Address | Compensation paid |
|----------------|------------------------------|-------------------|
| Linda Rosehill | Rosehill & Associates | \$3,470.62 |
| | Executive Centre, Suite 1010 | |
| | 1088 Bishop Street | |
| | Honolulu, HI 96813 | |
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EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred by lobbyist for the purpose of lobbying of \$25 or more per person per day during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

| Name & Address | On behalf of ORG# | Amount or value |
|----------------|-------------------|-----------------|
| | | |
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AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred by lobbyist for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

| Name & Address | On behalf of ORG# | Amount or value |
|----------------|-------------------|-----------------|
| | | |
| | | |
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| | | |

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☒ This section is not applicable

☐ Contributions in the total sum of \$25 or more per person were received from the following persons:

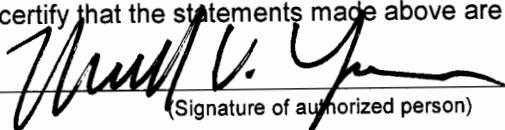
| Name & Address | Amount or value |
|----------------|-----------------|
| | |
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PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge


(Signature of authorized person)

1/9/06
(Date)

Name of authorized person (type or print) Michael V. Yamane

Title of authorized person Vice President, Strategic Planning